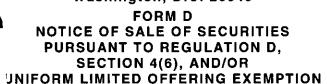
FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549



OMB APP	ROVAL
OMB Number: Expires: Estimated average I hours per form	July 31, 2008 burden
SEC USE	ONLY
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Name of Offering (check if this is an am	SEC				
Limited Partnership Interests of Maple Leaf F	Partners I, LP				nont an migro
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	Section 4	(6) ULOE
Type of Filing:	Amendment				
					ქას 22 2ბავ
	A. BASI	CIDENTIFICAT	ION DATA		
1. Enter the information requested about the i	ssuer				Washington, DC
Name of Issuer	104				
Maple Leaf Partners I, LP					72.
Address of Executive Offices		(Number and Street	et, City, State, Zip Co	ode) Telephor	e Number (Including Area Code)
c/o Maple Leaf Capital I, L.L.C., 450 Laurel St	reet, Suite 2105, Ba	nton Rouge, LA 70	801		225.706.1600
Address of Principal Offices		(Number and Stree	et, City, State, Zip Co	via) Telephon	e Number (Including Area Code)
(if different from Executive Offices)		(14bitibel and Street	st, Oity, State, Zip Ct	de) Telephor	ie (Miniber (Micidaling Area 000e)
<u> </u>				7	PROCESSED
Brief Description of Business: private inves	tment company			4) INCOLOULD
Type of Business Organization			·· ··-		JUL 2 5 2008
corporation	⊠ limited o	artnership, already	formed	Other (pleas	se specify)
□ business trust		partnership, to be fo		u	THOMSON REUTERS
	<u></u> .	Month	Yea		
Actual or Estimated Date of Incorporation or Org	anization:	1 2	0		Actual Estimated
Jurisdiction of Incorporation or Organization: (El	L	Postal Service Abbri	viation for State:		
			r other foreign jurisd	iction)	D E
					, , ,

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are

not required to respond unless the form displays a currently valid OMB control number. A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Executive Officer ☐ General and/or Managing Partner □ Promoter ☐ Beneficial Owner ☐ Director Check Box(es) that Apply: Full Name (Last name first, if individual): Maple Leaf Capital I, L.L.C. 450 Laurel Street, Suite 2105, Baton Rouge, LA 70801 Business or Residence Address (Number and Street, City, State, Zip Code): □ Director Managing Member Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer Full Name (Last name first, if individual): Dane C. Andreeff c/o Maple Leaf Capital I, L.L.C., 450 Laurel Street, Suite 2105, Baton Business or Residence Address (Number and Street, City, State, Zip Code): Rouge, LA 70801 Check Box(es) that Apply: ☐ Promoter ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Brydell Associates, L.P. c/o Maple Leaf Capital I, L.L.C., 450 Laurel Street, Suite 2105, Baton Business or Residence Address (Number and Street, City, State, Zip Code): Rouge, LA 70801 □ Promoter Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual): **Elizabeth Querbes Sammons** Business or Residence Address (Number and Street, City, State, Zip Code): c/o Maple Leaf Capital I, L.L.C., 450 Laurel Street, Suite 2105, Baton Rouge, LA 70801 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Business or Residence Address (Number and Street, City, State, Zip Code): Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Business or Residence Address (Number and Street, City, State, Zip Code): Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Business or Residence Address (Number and Street, City, State, Zip Code): ☐ Director ☐ General and/or Managing Partner Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner □ Executive Officer Full Name (Last name first, if individual): Business or Residence Address (Number and Street, City, State, Zip Code): Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner (Use blank sheet, or copy and use additional copies of this sheet, as necessary) **B. INFORMATION ABOUT OFFERING**

1	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						☐ Yes	s ⊠ No					
2.	taran da antara da a									*******		1,000,000*	
													*May be waived
3.	Does the offe	ring permi	it joint own	ership of a	single uni	t?						⊠ Ye	s 🗆 No
	Enter the info any commiss offering. If a and/or with a associated pe	ion or simi person to state or st	ilar remune be listed is tates, list th	eration for an associ ne name o	solicitation iated perso f the broke	of purcha on or agen or or deale	sers in cor t of a brok r. If more t	nnection w er or deale than five (5	ith sales o er registere 5) persons	f securities d with the to be liste	s in the SEC d are		N/A
Full N	lame (Last na	ame first, i	f individual)									
Busir	ess or Resid	ence Addr	ess (Numb	per and Sta	reet, City,	State, Zip	Code)						
Nam	e of Associate	ed Broker	or Dealer										
	s in Which Pe (Check "All S												☐ All States
□ [A					•		[DE]			☐ [GA]	(HI)	☐ [ID]	☐ All States
□ [II	.) 🔲 [IN]	□ [IA]	□ [KS]	☐ [KY]	□ [LA]	☐ [ME]	[MD]	[MA]	[MI]	[MN]	☐ [MS]	[MO]	
□ [N	IT) [NE]	□ [NV]	□ [NH]	□ [NJ]	□ [NM]	□ [NY]	□ [NC]	□ [ND]	□ [OH]		□ [OR]	□ [PA]	
☐ {F	i] 🔲 [SC]	☐ [SD]	□ [TN]	□ [TX]	□ [UT]	□ [VT]	□ [VA]	[WA]	[WV]	□ [WI]		□ [PR]	
Full N	lame (Last na	ame first, ii	f individual)									
Busir	ess or Resid	ence Addr	ess (Numt	per and Str	eet, City, S	State, Zip	Code)						
Name	of Associate	ed Broker	or Dealer										
	s in Which Pe Check "All S												All States
□ [A	L] [AK]	□ [AZ]	□ [AR]	CA]			□ [DE]		[FL]	☐ [GA]	☐ [HI]	□ (ID)	
□ (it] 🔲 [IN]	[Ai]	[KS]	□ [KY]	☐ [LA]	☐ [ME]	☐ [MD]	☐ [MA]	☐ [MI]	☐ [MN]	☐ [MS]		
□ [N		□ [NV]			□ [NM]			☐ [ND]					
□ (F	i) [SC]			[XT]	☐ [UT]	□ (VT)	□ [VA]	[WA]				☐ [PR]	
Full N	lame (Last na	ıme first, if	individual)									
Busin	ess or Resid	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip (Code)						
Name	of Associate	d Broker o	or Dealer										
	s in Which Pe Check "All Si							-					All States
□ [A		☐ [AZ]			[CO]			□ [DC]		☐ [GA]	[HI]	[ID]	
🗆 (ir] 🔲 [IN]	□ [IA]	☐ [KS]	□ [KY]	☐ [LA]	[ME]	[MD]	[MA]	[MI]	☐ [MN]	☐ [MS]	☐ [MO]	
□ [N	Π [NE]	□ [NV]	□ [NH]	[[VN]	□ [NM]	□ [NY]		□ [ND]			☐ (OR)	□ [PA]	
□ (R] [SC]	☐ [SD]	□ [TN]	□ [TX]			□ [VA]	☐ [WA]	□ [WV]	□ (WI)	[WY]	□ (PR)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	already exchanged.		Aggregate		Amount Already
	Type of Security		Offering Price		Sold
	Debt	\$	0	<u>\$</u>	0_
	Equity	<u>\$</u>	0	<u>\$</u>	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	<u>\$</u>	0	\$	0
	Partnership Interests	<u>\$</u>	100,000,000	\$	39,112,114
	Other (Specify))	\$	0	<u>\$</u>	0
	Total	\$	100,000,000	<u>\$</u>	39,112,114
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregate
			Number Investors		Dollar Amount of Purchases
	Accredited Investors		61	\$	39,112,114
	Non-accredited Investors		0	<u>\$</u>	0
	Total (for filings under Rule 504 only)		0	\$	00
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
	Type of Offering		Types of Security		Dollar Amount Sold
	Rule 505		•	\$	n/a
	Regulation A			- - -	n/a
	Rule 504		n/a	- <u>-</u>	n/a
	<u></u>			· <u>*</u>	
	Total		n/a	<u>\$</u>	n/a
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		🗆	\$	0
	Printing and Engraving Costs		🗆	\$	0
	Legal Fees		🛛	\$	24,150
	Accounting Fees		🗆	\$	0
	Engineering Fees		🗆	\$	0
	Sales Commissions (specify finders' fees separately)		🗆	\$	0
	Sales Commissions (specify finders' fees separately)			\$ \$	0

	C. OFFERING PRICE, NUMBE	ER OF INVESTORS, EXPI	ENSES	AND USE OF PROC	EEDS	<u> </u>
4	b. Enter the difference between the aggregate offering Question 1 and total expenses furnished in response to F adjusted gross proceeds to the issuer.*	Part C-Question 4.a. This differe	nce is the	•	<u>\$</u>	99,975,850
5	Indicate below the amount of the adjusted gross proceed used for each of the purposes shown. If the amount for a estimate and check the box to the left of the estimate. The adjusted gross proceeds to the issuer set forth in response.	any purpose is not known, furnish ne total of the payments listed mu	an Ist equal			
	the adjusted gross proceeds to the issuer set forth in resp	oonse to Part C – Question 4.0. a	ibuve.	Payments to Officers, Directors & Affiliates		Payments to Others
	Salaries and fees			\$		\$
	Purchase of real estate			\$. 🗆	\$
	Purchase, rental or leasing and installation of made	chinery and equipment		\$		\$
	Construction or leasing of plant buildings and faci	lities		\$		\$
	Acquisition of other businesses (including the value	ue of securities involved in this				
	offering that may be used in exchange for the ass pursuant to a merger		ָרם י	\$		\$
	Repayment of indebtedness			\$		\$
	Working capital			\$		\$99,975,850
	Other (specify):			\$		<u>\$</u>
				\$		\$
	Column Totals			\$		\$99,975,850
	Total payments Listed (column totals added)			⊠ <u>\$</u> 9	9,975	5,850
		D. FEDERAL SIGNATUI	RF			
Th	is issuer has duly caused this notice to be signed by the u	· · · · · · · · · · · · · · · · · · ·		notice is filed under Rule	505 the	following signature
CO	nstitutes an undertaking by the issuer to furnish to the U.S the issuer to any non-accredited investor pursuant to para	. Securities and Exchange Comm				
	suer (Print or Type) aple Leaf Partners I, LP	Signature		,Da	ate Ju	ul ž 18,2008
	me of Signer (Print or Type)	Title of Signer (Print or Type)	/			
	ne C. Andreeff	Managing Member of Maple L	eaf Cap	ital I, L.L.C., its General I	Partner	
	·					
	•					
		ATTENTION				

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE				
1.	Is any party described in 17 CFR 230.262 presenting provisions of such rule?	ly subject to any of the disqualification	☐ Yes ☒ No			
	See Appe	endix, Column 5, for state response.				
2.	The undersigned issuer hereby undertakes to furn (17 CFR 239.500) at such times as required by sta	ish to any state administrator of any state in which this notice is fil ate law.	led a notice on Form D			
3.	The undersigned issuer hereby undertakes to furn	ish to the state administrators, upon written request, information f	urnished by the issuer to offerees.			
4 .	•	is familiar with the conditions that must be satisfied to be entitled is filed and understands that the issuer claiming the availability of tisfied.				
	uer has read this notification and knows the contents red person.	to be true and has duly caused this notice to be signed on its bel	half by the undersigned duly			
•	Print or Type) Leaf Partners I, LP	Signature	Date July 18, 2008			
Name o	of Signer (Print or Type)	Title of Signer (Print or Type)				
Dane C	. Andreeff	Managing Member of Maple Leaf Capital I, L.L.C., its General Partner				

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APF	PENDIX					
		<u> </u>						5		
1	Intend to non-ad investors	to sell ccredited in State	Type of security and aggregate offering price offered in state		Type of investor and amount purchased in State					
State	Yes	t B – Item 1) (Part C – Item 1) (Part C – Item 2) Number of Number of Non-Accredited					(Part E -	No		
AL				_						
AK										
AZ										
AR										
CA		х	\$100,000,000	5	\$1,864,766	0	\$0		х	
со										
СТ				·						
DE		X	\$100,000,000	1	\$1,097,526	0	\$0		х	
DC		, ,								
FL		Х	\$100,000,000	2	\$650,755	0	\$0		Х	
GA		Х	\$100,000,000	1	\$1,440,000	0	\$0		х	
ні										
ID										
IL										
IN										
IA										
KS										
KY		х	\$100,000,000	2	\$942,397	0	\$0		х	
LA		Х	\$100,000,000	14	\$3,424,659	0	\$0		х	
ME										
MD										
МА										
Mi										
MN										
MS										
мо										
MT										
NE										
NV		-								
NH										
NJ		Х	\$100,000,000	2	\$840,015	0	\$0		х	
NM		x	\$100,000,000	1	\$1,000,000	0	\$0		х	

				AP	PENDIX				
1	:	2	3			4		5	5
	to non-ad	to sell ccredited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Amount purch	vestor and nased in State – Item 2)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)	
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NY		х	\$100,000,000	17	\$19,704,412	0	\$0		х
NC		х	\$100,000,000	1	\$500,000	0	\$0		х
ND									
ОН									
ОК									
OR		х	\$100,000,000		%1,551,092	0	\$0		х
PA									
RI									
sc		х	\$100,000,000	1	\$346,842	0	\$0		Х
SD									
TN		Х	\$100,000,000	2	\$1,950,000	0	\$0		х
TX		х	\$100,000,000	5	\$3,104,396	0	\$0		x
UT									
VT									
VA		х	\$100,000,000	4	\$914,754	0	\$0		X
WA									
WV							. <u>.</u>		
WI									
WY									
Non US									

